

OEHE Course Registration Form

Yukon-Kuskokwim Health Corporation
Office of Environmental Health
P.O. Box 528 Bethel, AK 99559
Phone: 907-543-6420 or 800-478-6599
Fax: 907-543-6425



Introduction to Small Water Systems

April 14-16, 2014

Applicant's Name: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
Email Address : _____
Work Phone: _____ Work Fax: _____ Home Phone: _____
Employer: _____ Supervisor/Authority's Name: _____

EXAM INFORMATION:

The Small Treated Water Systems Exam will be given on the final day of training.

TRAINING INFORMATION:

DATE/TIME:

Monday-Wednesday, April 14-16, 2014
Class is held from 8am– 5pm Mon. & Tues. and 8am-2pm Wed.

TRAINING LOCATION:

Yuut Elitnaurviat, 610 Akiachak Drive,
Bethel, AK 99559

LODGING LOCATION:

Yuut Elitnaurviat Dorms

FEES:

Tuition Fee: \$ 250.00 + optional fees

Exam Fee: \$50 (due at training)

EXAMS/FEES:

Tuition Fee Total \$250.00

Optional Meal Fee \$90.00

Optional Lodging Fee \$225.00

*due with registration.

*If taking the Small Treated Exam:

Exam Application Fee \$20.00

Small Treated Exam \$30.00

Exam Fee Total: \$50.00

*due at training.

*Please make checks payable to YKHC-OEHE.

YKHC OEHE DOES NOT PROVIDE MEALS OR LODGING FOR NON-VILLAGE CLASS PARTICIPANTS. PARTICIPANT CAN PAY AN EXTRA \$30 PER DAY FOR MEALS & \$75 PER NIGHT FOR LODGING.

Students will receive 2.0 CEUS upon completion of the course.

CONDUCT POLICY

- Class participants are expected to act professionally and treat hotel and OEHE staff accordingly.
- Disorderly conduct of any kind if not acceptable, this includes complaints or eviction from the hotel.
- Participants will be free of alcohol and drugs during the training period, including time spent out of class.
- Class tardiness will not be permitted. We reserve the right to refuse admittance to any person not arriving to class on time. Any attendee missing **two** hours of class will not be awarded CEUs or allowed to take the certification exam.

VIOLATION OF CONDUCT

- If a trainee violates the conduct policy, the trainee will be immediately dismissed from the course. The Supervisor/Authority will be responsible for ALL fees or fines incurred during the training course. Additionally, hotel and meal costs must be reimbursed. Until OEHE is repaid, no other attendees will be accepted from your organization.

By signing this document, I understand the conditions under which the training is offered, and by my signature, I agree to the conduct policy and training policy changes.

Applicant's Signature: _____ Date: _____

Supervisor/Authority's Signature: _____ Date: _____

Mail completed OEHE Course Registration Form AND payment to:
YKHC-OEHE, PO Box 528, Bethel, AK 99559
Registration will not be confirmed until payment is received!
Registration forms must be received by March 21st, 2014

